

REMARKS

Claims 1 and 3-9, 11-27, and 29 are pending. Claims 1 and 9 are independent. Claims 13-27 have been previously withdrawn from consideration. Claim 2, 10, and 28 were previously canceled.

Claims 1, 3-4, 8-9, 11-12, and 29 stand rejected while claims 5-7 stand objected to based upon their dependency, but are otherwise deemed allowable. The drawings and specification have also been objected to.

As to the drawings, paragraphs 19 and 29 of the as-published specification have been amended to more closely conform with figures 2 and 4. In paragraph 19, the number 206 has been replaced with the number 26, which is used in corresponding figure 2. In paragraph 29, the number 46 has been replaced with the number 35, which is used in corresponding figure 4.

As to the specification, the Office action's objection appears to be based upon an alleged discrepancy between what is disclosed in paragraphs 20 and 22 and the claims. The undersigned submits that no discrepancy exists and requests reconsideration and withdrawal of the objection. As an initial matter, the application should be read holistically and not in the focused manner suggested by the Office action through its citation to selected paragraphs and figures. Second, in its objection, the Office action contends that "the specification disclose[s] that the hardness of the sections decreases, then increases and then decreases again. However, when the given durometer hardnesses were applied ... the hardness decrease[s] ... then increase[s] ... then increase[s] again ... which is quite opposite from what the specification and claims disclose as the patentable subject matter." This objection is unfounded because the specification provides clear support for the idea of having the hardness of a wall of a catheter decrease, increase, and then decrease again when considered from an initial reference point. See, for example, paragraph 4 of the specification, which almost parrots this language exactly. See also as filed claim 1, which contains claim language reciting this feature as well. Consequently, the specification shows that the inventor knew of and disclosed varying hardnesses in the wall of a catheter at the time of filing.

As to the paragraphs specifically identified in the Office action (nos. 20 and 22), both of them support the notion that the present invention includes catheters having walls with a

hardness that varies. The durometer readings in paragraph 20 are consistent with this concept. For example, if the first region is thought to be sections 23 and 24, the hardness of this region is decreasing, going from 74 to 63. Next, if the second region is considered to be sections 25 and 27, the hardness of this region is increasing, going from 65 to 70. Lastly, if the third region is considered to be sections 201 to 203, the hardness of this region is decreasing, from 40-36. Consequently, there is empirical support in figure 2 for the claimed language.

As to rejected claim 1 and its dependent claims, they are allowable over the cited patents at least because none of them disclose the concept of regions of *varying* hardness that follow one another. In Garibaldi (6,524,303), the sections of the catheter identified as regions in the Office action (34, 36, and 38 of fig. 1) each have *consistent* hardnesses, the hardness of each section is not decreasing or increasing but is, rather, uniform. By comparison, claim 1 recites a wall *decreasing* in hardness in a first distinct region, *increasing* in hardness in a second distinct region, and *decreasing* in hardness in a third distinct region. Thus, the claimed regions have variable hardnesses within themselves and not simply between adjacent regions as suggested by the Office action. Moreover, even if adjacent sections of the catheter in Garibaldi are considered to be a region with a varying hardness, which they are not, these regions are not ordered as recited in the claim – decreasing in hardness, increasing in hardness, and decreasing in hardness. For at least these reasons claim 1 and its dependent claims are patentable over the cited patents.

As to rejected claim 9, the Office action contends that Kinoshita (6,280,434) in combination with Noone (6,591,472) renders it obvious. However, not only is there no motivation outside of the applicant's disclosure to make the suggested combination, even if the combination is made, the cited patents still fail to disclose or suggest language from the claim. For instance, neither patent discloses or suggests a "steerable guide catheter having ... a plurality of flushing orifices," as recited in claims 9. Kinoshita, which is cited for disclosing a plurality of apertures, is entitled "Angiographic Catheter" and regards a passive catheter that "is used to form an radiopaque image of a lumina of a human such as blood vessels of a heart, a liver, a pancreas, a bile duct of the like." See col. 8 at 16-20. The catheter in Kinoshita is not steerable as it contains a pig tail at its distal end and because Kinoshita discloses the use of a guide-wire to position the catheter in the body, see col. 3, lns. 44-50. Comparatively, claim 9 recites a steerable guide catheter having a plurality of orifices. Thus, the cited claim language is not disclosed or suggested by Kinoshita. Noone, the other cited patent, is even further removed as it does not disclose or suggest a plurality of orifices, let alone those in a steerable catheter as

claimed. Thus, at least because the catheter in Kinoshita is not steerable, claim 9 and its dependent claims are patentable over Kinoshita and Noone.

Conclusion

It is believed that the above-identified application is in condition for allowance, and notice to that effect is respectfully requested.

Should the Examiner have any questions, the Examiner is encouraged to contact the undersigned at the telephone number indicated below.

The Commissioner is authorized to charge any fees or credit any overpayments which may be incurred in connection with this paper under 37 C.F.R. §§ 1.16 or 1.17 to Deposit Account No. 11-0600.

Respectfully submitted,

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